

# PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/> Wage DC170002 (Mod. 3) Det:		ADDRESS 2320 Old Washington Road Waldorf, MD 20601	
PAYROLL NO. 1.1		FOR WEEK ENDING 07/29/2018	PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.
		PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020	

(1)  NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2)  NO. OF WITHHOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST, OT or DT	(4) DAY AND DATE							(5)  TOTAL HOURS	(6)  RATE OF PAY	(7)  GROSS AMOUNT EARNED	(8) DEDUCTIONS  * Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions						(9)  NET WAGES PAID FOR WEEK/ Check No.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																						
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# PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage DC170002 (Mod. 3) Det:		ADDRESS 2320 Old Washington Road Waldorf, MD 20601	
Atlantic Refinishing & Restoration, Inc.					
PAYROLL NO. 1.1		FOR WEEK ENDING 07/29/2018		PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.	
				PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020	

(1)	(2)	(3)	ST, OT or DT	(4) DAY AND DATE							(5)	(6)	(7)	(8)						(9)							
NAME, ADDRESS, AND Identification Number	NO. OF WITHHOLDING EXEMPTIONS	WORK CLASSIFICATION		MON	TUE	WED	THU	FRI	SAT	SUN	TOTAL HOURS	RATE	GROSS AMOUNT	DEDUCTIONS						NET WAGES PAID FOR WEEK/							
				23	24	25	26	27	28	29				* Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions													
				HOURS WORKED EACH DAY																							
(b) (6)	1	Laborer: Common/General	D	0	0	0	0	0	0	0	0.00	(b) (4)															
			O	0	0	0	0	0	0	0	0.00																
			S	0	0	8.00	8.00	8.00	6.00	0	30.00																
	0	Bricklayer:	D	0	0	0	0	0	0	0	0.00																
			O	0	0	0	0	0	0	0	0.00																
			S	8.00	8.00	8.00	0	0	0	0	24.00																
	3	Bricklayer:	D	0	0	0	0	0	0	0	0.00																
			O	0	0	0	0	0	0	0	0.00																
			S	0	0	0	0	8.00	6.00	0	14.00																
	8	Laborer: Common/General	D	0	0	0	0	0	0	0	0.00																
			O	0	0	0	0	0	0	0	0.00																
			S	0	0	8.00	8.00	8.00	0	0	24.00																

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Atlantic Refinishing & Restoration, Inc.					
PAYROLL NO. 1.1		FOR WEEK ENDING 07/29/2018		PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.	
				PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020	

(1)	(2)	(3)	ST, OT or DT	(4) DAY AND DATE							(5)	(6)	(7)	(8)						(9)																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																									
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NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/> Wage DC170002 (Mod. 3) Det: Atlantic Refinishing & Restoration, Inc.		ADDRESS 2320 Old Washington Road Waldorf, MD 20601	
PAYROLL NO. 1.1	FOR WEEK ENDING 07/29/2018	PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.	PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020

(1)  NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2)  NO. OF WITH-HOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST. OT or DT	(4) DAY AND DATE							(5)  TOTAL HOURS	(6)  RATE OF PAY	(7)  GROSS AMOUNT EARNED	(8) DEDUCTIONS						(9)  NET WAGES PAID FOR WEEK/ Check No.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																														
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Date August 17th, 2018

I, (b) (6) (b) (6)  
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company on the  
Inc.) (Contractor or Subcontractor)

St. Elizabeths West Campus Building 54 ; that during the payroll period commencing on the  
(Building or Work)

23rd day of July, 2018, and ending the 29th day of July, 2018

all persons employed on said project have been paid the full weekly wages earned, that no rebates  
have been or will be made either directly or indirectly to or no behalf of said

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company from the full  
Inc.) (Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly  
from the full wages earned by any person, other than permissible deductions as defined in Regulations,  
Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48  
Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

FICA, FWH, Medicare, State Tax, Other

(2) That any payrolls otherwise under this contract required to be submitted for the above period are  
correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the  
applicable wage rates contained in any wage determination incorporated into the contract; that the  
classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship  
program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and  
Training, United States Department of Labor, or if no such recognized agency exists in a State, are  
registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ - in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the  
above referenced payroll, payments of fringe benefits as listed in the contract have been  
or will be made to appropriate programs for the benefit of such employees, except as  
noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ - Each laborer or mechanic listed in the above referenced payroll has been paid, as  
indicated on the payroll, an amount not less than the sum of the applicable basic  
hourly wage rate plus the amount of the required fringe benefits as listed in the  
contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

REMARKS

Contract #GS-11-P-17-MK-C-0020, Wage Decision #DC170002 Mod 3 05/05/17, Revised  
Payroll #1.1-Downloaded wrong file.

NAME AND TITLE:

(b) (6)

SIGNATURE:

(b) (6)

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR  
SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE  
31 OF THE UNITED STATES CODE.

# PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage DC170002 (Mod. 3) Det:	ADDRESS 2320 Old Washington Road Waldorf, MD 20601	
Atlantic Refinishing & Restoration, Inc.				
PAYROLL NO. 2.1	FOR WEEK ENDING 08/05/2018	PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.		PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020

(1)  NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2)  NO. OF WITHHOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST, OT or DT	(4) DAY AND DATE							(5)  TOTAL HOURS	(6)  RATE OF PAY	(7)  GROSS AMOUNT EARNED	(8) DEDUCTIONS						(9)  NET WAGES PAID FOR WEEK/ Check No.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																				
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(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage DC170002 (Mod. 3) Det:	ADDRESS 2320 Old Washington Road Waldorf, MD 20601	
Atlantic Refinishing & Restoration, Inc.				
PAYROLL NO. 2.1	FOR WEEK ENDING 08/05/2018	PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.		PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020

(1)  NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2)  NO. OF WITHHOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST, OT or DT	(4) DAY AND DATE							(5)  TOTAL HOURS	(6)  RATE	(7)  GROSS AMOUNT	(8) DEDUCTIONS						(9)  NET WAGES PAID FOR WEEK/ Check No.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																						
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(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage DC170002 (Mod. 3) Det:		ADDRESS 2320 Old Washington Road Waldorf, MD 20601	
Atlantic Refinishing & Restoration, Inc.					
PAYROLL NO. 2.1		FOR WEEK ENDING 08/05/2018		PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.	
				PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020	

(1)  NAME, ADDRESS, AND Identification Number	(2)  NO. OF WITHHOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST, OT or DT	(4) DAY AND DATE							(5)  TOTAL HOURS	(6)  RATE	(7)  GROSS AMOUNT	(8) DEDUCTIONS						(9)  NET WAGES PAID FOR WEEK/ Check No.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																		
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(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/> Wage DC170002 (Mod. 3) Det: Atlantic Refinishing & Restoration, Inc.		ADDRESS 2320 Old Washington Road Waldorf, MD 20601	
PAYROLL NO. 2.1	FOR WEEK ENDING 08/05/2018	PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.	PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020

(1)  NAME, ADDRESS, AND Identification Number	(2)  NO. OF WITHHOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST, OT or DT	(4) DAY AND DATE							(5)  TOTAL HOURS	(6)  RATE OF PAY	(7)  GROSS AMOUNT EARNED	(8) DEDUCTIONS						(9)  NET WAGES PAID FOR WEEK/ Check No.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																	
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# PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage DC170002 (Mod. 3) Det:		ADDRESS 2320 Old Washington Road Waldorf, MD 20601	
Atlantic Refinishing & Restoration, Inc.					
PAYROLL NO. 2.1		FOR WEEK ENDING 08/05/2018		PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.	
				PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020	

(1)  NAME, ADDRESS, AND Identification Number	(2)  NO. OF WITHHOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST, OT or DT	(4) DAY AND DATE							(5)  TOTAL HOURS	(6)  RATE OF PAY	(7)  GROSS AMOUNT EARNED	(8) DEDUCTIONS						(9)  NET WAGES PAID FOR WEEK/ Check No.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																		
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Date August 17th, 2018

I, (b) (6) (b) (6)  
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company on the  
Inc.) (Contractor or Subcontractor)

St. Elizabeths West Campus Building 54; that during the payroll period commencing on the  
(Building or Work)

30th day of July, 2018, and ending the 5th day of August, 2018

all persons employed on said project have been paid the full weekly wages earned, that no rebates  
have been or will be made either directly or indirectly to or no behalf of said

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company from the full  
Inc.) (Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly  
from the full wages earned by any person, other than permissible deductions as defined in Regulations,  
Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48  
Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

FICA, FWH, Medicare, State Tax, Other

(2) That any payrolls otherwise under this contract required to be submitted for the above period are  
correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the  
applicable wage rates contained in any wage determination incorporated into the contract; that the  
classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship  
program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and  
Training, United States Department of Labor, or if no such recognized agency exists in a State, are  
registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ - in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the  
above referenced payroll, payments of fringe benefits as listed in the contract have been  
or will be made to appropriate programs for the benefit of such employees, except as  
noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☐ - Each laborer or mechanic listed in the above referenced payroll has been paid, as  
indicated on the payroll, an amount not less than the sum of the applicable basic  
hourly wage rate plus the amount of the required fringe benefits as listed in the  
contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

REMARKS

Contract #GS-11-P-17-MK-C-0020, Wage Decision #DC170002 Mod 3 05/05/17, Revised  
Payroll #2.1-Downloaded wrong file

NAME AND TITLE:

(b) (6)

SIGNATURE:

(b) (6)

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31 OF THE UNITED STATES CODE.

# PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage DC170002 (Mod. 3) Det:	ADDRESS 2320 Old Washington Road Waldorf, MD 20601
PAYROLL NO. 3.1	FOR WEEK ENDING 08/12/2018	PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.	PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020

(b) (6)

(b) (6)

(2) NO. OF WITH-HOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST. OT or DT	(4) DAY AND DATE								(5)  TOTAL HOURS	(6)  RATE	(7)  GROSS AMOUNT	(8) DEDUCTIONS						(9)  NET WAGES PAID FOR WEEK/ Check No.
			* Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions																	
														WITH- HOLDING					TOTAL	
			HOURS WORKED EACH DAY																	
1	Laborer: Common/General	D	0	0	0	0	0	0	0	0	0.00	(b) (4)								
		O	0	0	0	0	0	0	0	0	0.00									
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0	Bricklayer:	D	0	0	0	0	0	0	0	0	0.00	(b) (4)								
		O	0	0	0	0	0	0	0	0	0.00									
		S	2.00	0	0	8.00	8.00	0	0	18.00										
1	Laborer: Common/General	D	0	0	0	0	0	0	0	0	0.00	(b) (4)								
		O	0	0	0	0	0	0	0	0	0.00									
		S	8.00	8.00	8.00	8.00	8.00	0	0	40.00										
5	Laborer: Common/General	D	0	0	0	0	0	0	0	0	0.00	(b) (4)								
		O	0	0	0	0	0	0	0	0	0.00									
		S	8.00	8.00	8.00	8.00	8.00	0	0	40.00										

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# PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage DC170002 (Mod. 3) Det:		ADDRESS 2320 Old Washington Road Waldorf, MD 20601	
Atlantic Refinishing & Restoration, Inc.					
PAYROLL NO. 3.1		FOR WEEK ENDING 08/12/2018		PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.	
				PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020	

(1)  NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2)  NO. OF WITHHOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST, OT or DT	(4) DAY AND DATE							(5)  TOTAL HOURS	(6)  RATE OF PAY	(7)  GROSS AMOUNT EARNED	(8) DEDUCTIONS						(9)  NET WAGES PAID FOR WEEK/ Check No.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																											
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NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/> Wage DC170002 (Mod. 3) Det: Atlantic Refinishing & Restoration, Inc.		ADDRESS 2320 Old Washington Road Waldorf, MD 20601	
PAYROLL NO. 3.1	FOR WEEK ENDING 08/12/2018	PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.	PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020

(1)  NAME, ADDRESS, AND Identification Number	(2)  NO. OF WITHHOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST, OT or DT	(4) DAY AND DATE							(5)  TOTAL HOURS	(6)  RATE OF PAY	(7)  GROSS AMOUNT EARNED	(8) DEDUCTIONS						(9)  NET WAGES PAID FOR WEEK/ Check No.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																						
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Atlantic Refinishing & Restoration, Inc.			
PAYROLL NO. 3.1	FOR WEEK ENDING 08/12/2018	PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.	PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020

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Date August 17th, 2018

I, (b) (6) (b) (6)  
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company on the  
Inc.) (Contractor or Subcontractor)

St. Elizabeths West Campus Building 54; that during the payroll period commencing on the  
(Building or Work)

6th day of August, 2018, and ending the 12th day of August, 2018

all persons employed on said project have been paid the full weekly wages earned, that no rebates  
have been or will be made either directly or indirectly to or no behalf of said

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company from the full  
Inc.) (Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly  
from the full wages earned by any person, other than permissible deductions as defined in Regulations,  
Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48  
Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

FICA, FWH, Medicare, State Tax, Other

(2) That any payrolls otherwise under this contract required to be submitted for the above period are  
correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the  
applicable wage rates contained in any wage determination incorporated into the contract; that the  
classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship  
program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and  
Training, United States Department of Labor, or if no such recognized agency exists in a State, are  
registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ - in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the  
above referenced payroll, payments of fringe benefits as listed in the contract have been  
or will be made to appropriate programs for the benefit of such employees, except as  
noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☐ - Each laborer or mechanic listed in the above referenced payroll has been paid, as  
indicated on the payroll, an amount not less than the sum of the applicable basic  
hourly wage rate plus the amount of the required fringe benefits as listed in the  
contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

REMARKS

Contract #GS-11-P-17-MK-C-0020, Wage Decision #DC170002 Mod 3 05/05/17, Revised  
Payroll #3.1-Employee on wrong job

NAME AND TITLE:

(b) (6)

SIGNATURE:

(b) (6)

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR  
SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE  
31 OF THE UNITED STATES CODE.

# PAYROLL

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Atlantic Refinishing & Restoration, Inc.							
PAYROLL NO. 4.0		FOR WEEK ENDING 08/19/2018		PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.		PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020	

(1)  NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2)  NO. OF WITH-HOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST, OT or DT	(4) DAY AND DATE							(5)  TOTAL HOURS	(6)  RATE	(7)  GROSS AMOUNT	(8) DEDUCTIONS						(9)  NET WAGES PAID FOR WEEK/ Check No.	
				MON	TUE	WED	THU	FRI	SAT	SUN				* Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions							
				13	14	15	16	17	18	19					WITH- HOLDING						TOTAL
				HOURS WORKED EACH DAY																	
(b) (6)	1	Laborer: Common/General	D	0	0	0	0	0	0	0	0.00	(b) (4)									
			O	0	0	0	0	0	0	0	0.00										
			S	8.00	8.00	0	8.00	8.00	0	0	32.00										
(b) (6)	0	Bricklayer:	D	0	0	0	0	0	0	0	0.00	(b) (4)									
			O	0	0	0	0	0	0	0	0.00										
			S	2.00	0	0	0	0	0	0	2.00										
(b) (6)	1	Laborer: Common/General	D	0	0	0	0	0	0	0	0.00	(b) (4)									
			O	0	0	0	0	0	0	0	0.00										
			S	8.00	8.00	8.00	8.00	8.00	0	0	40.00										
(b) (6)	5	Laborer/Skilled	D	0	0	0	0	0	0	0	0.00	(b) (4)									
			O	0	0	0	0	0	0	0	0.00										
			S	8.00	8.00	8.00	8.00	8.00	0	0	40.00										

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Atlantic Refinishing & Restoration, Inc.			
PAYROLL NO. 4.0	FOR WEEK ENDING 08/19/2018	PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.	PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020

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# PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage DC170002 (Mod. 3) Det:		ADDRESS 2320 Old Washington Road Waldorf, MD 20601	
Atlantic Refinishing & Restoration, Inc.					
PAYROLL NO. 4.0		FOR WEEK ENDING 08/19/2018		PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.	
				PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020	

(1)  NAME, ADDRESS, AND Identification Number	(2)  NO. OF WITH-HOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST, OT or DT	(4) DAY AND DATE							(5)  TOTAL HOURS	(6)  RATE OF PAY	(7)  GROSS AMOUNT EARNED	(8) DEDUCTIONS						(9)  NET WAGES PAID FOR WEEK/ Check No.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																					
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While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

# PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage DC170002 (Mod. 3) Det:		ADDRESS 2320 Old Washington Road Waldorf, MD 20601	
Atlantic Refinishing & Restoration, Inc.					
PAYROLL NO. 4.0		FOR WEEK ENDING 08/19/2018		PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.	
				PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020	

(1)  NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2)  NO. OF WITH-HOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST, OT or DT	(4) DAY AND DATE							(5)  TOTAL HOURS	(6)  RATE OF PAY	(7)  GROSS AMOUNT EARNED	(8) DEDUCTIONS						(9)  NET WAGES PAID FOR WEEK/ Check No.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																				
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While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Date August 23rd, 2018

I, (b) (6) (b) (6)  
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company on the  
Inc.) (Contractor or Subcontractor)

St. Elizabeths West Campus Building 54 ; that during the payroll period commencing on the  
(Building or Work)

13th day of August, 2018, and ending the 19th day of August, 2018

all persons employed on said project have been paid the full weekly wages earned, that no rebates  
have been or will be made either directly or indirectly to or no behalf of said

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company from the full  
Inc.) (Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly  
from the full wages earned by any person, other than permissible deductions as defined in Regulations,  
Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48  
Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

FICA, FWH, Medicare, State Tax, Other

(2) That any payrolls otherwise under this contract required to be submitted for the above period are  
correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the  
applicable wage rates contained in any wage determination incorporated into the contract; that the  
classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship  
program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and  
Training, United States Department of Labor, or if no such recognized agency exists in a State, are  
registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ - in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the  
above referenced payroll, payments of fringe benefits as listed in the contract have been  
or will be made to appropriate programs for the benefit of such employees, except as  
noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☐ - Each laborer or mechanic listed in the above referenced payroll has been paid, as  
indicated on the payroll, an amount not less than the sum of the applicable basic  
hourly wage rate plus the amount of the required fringe benefits as listed in the  
contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

REMARKS

Contract #GS-11-P-17-MK-C-0020, Wage Decision #DC170002 Mod 3 05/05/17, Payroll #4

NAME AND TITLE:

(b) (6)

SIGNATURE:

(b) (6)

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR  
SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE  
31 OF THE UNITED STATES CODE.

# PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage DC170002 (Mod. 3) Det:		ADDRESS 2320 Old Washington Road Waldorf, MD 20601	
Atlantic Refinishing & Restoration, Inc.					
PAYROLL NO. 5.0		FOR WEEK ENDING 08/26/2018		PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.	
				PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020	

(1)  NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2)  NO. OF WITHHOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST, OT or DT	(4) DAY AND DATE							(5)  TOTAL HOURS	(6)  RATE	(7)  GROSS AMOUNT	(8) DEDUCTIONS						(9)  NET WAGES PAID FOR WEEK/																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																								
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While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Date August 31st, 2018

I, (b) (6) (b) (6)  
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company on the  
Inc.) (Contractor or Subcontractor)

St. Elizabeths West Campus Building 54; that during the payroll period commencing on the  
(Building or Work)

20th day of August, 2018, and ending the 26th day of August, 2018

all persons employed on said project have been paid the full weekly wages earned, that no rebates  
have been or will be made either directly or indirectly to or no behalf of said

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company from the full  
Inc.) (Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly  
from the full wages earned by any person, other than permissible deductions as defined in Regulations,  
Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48  
Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

FICA, FWH, Medicare, State Tax, Other

(2) That any payrolls otherwise under this contract required to be submitted for the above period are  
correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the  
applicable wage rates contained in any wage determination incorporated into the contract; that the  
classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship  
program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and  
Training, United States Department of Labor, or if no such recognized agency exists in a State, are  
registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ - in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the  
above referenced payroll, payments of fringe benefits as listed in the contract have been  
or will be made to appropriate programs for the benefit of such employees, except as  
noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☐ - Each laborer or mechanic listed in the above referenced payroll has been paid, as  
indicated on the payroll, an amount not less than the sum of the applicable basic  
hourly wage rate plus the amount of the required fringe benefits as listed in the  
contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

REMARKS

Contract #GS-11-P-17-MK-C-0020, Wage Decision #DC170002 Mod 3 05/05/17, Payroll #5

NAME AND TITLE:

(b) (6)

SIGNATURE:

(b) (6)

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR  
SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE  
31 OF THE UNITED STATES CODE.

# PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage DC170002 (Mod. 3) Det:		ADDRESS 2320 Old Washington Road Waldorf, MD 20601	
Atlantic Refinishing & Restoration, Inc.					
PAYROLL NO. 6.0		FOR WEEK ENDING 09/02/2018		PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.	
				PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020	

(1)  NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2)  NO. OF WITHHOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST, OT or DT	(4) DAY AND DATE							(5)  TOTAL HOURS	(6)  RATE	(7)  GROSS AMOUNT	(8) DEDUCTIONS						(9)  NET WAGES PAID FOR WEEK/ Check No.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																									
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While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Date September 7th, 2018

I, (b) (6) (b) (6)  
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company on the  
Inc.) (Contractor or Subcontractor)

St. Elizabeths West Campus Building 54 ; that during the payroll period commencing on the  
(Building or Work)

27th day of August, 2018, and ending the 2nd day of September, 2018

all persons employed on said project have been paid the full weekly wages earned, that no rebates  
have been or will be made either directly or indirectly to or no behalf of said

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company from the full  
Inc.) (Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly  
from the full wages earned by any person, other than permissible deductions as defined in Regulations,  
Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48  
Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

FICA, FWH, Medicare, State Tax, Other

(2) That any payrolls otherwise under this contract required to be submitted for the above period are  
correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the  
applicable wage rates contained in any wage determination incorporated into the contract; that the  
classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship  
program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and  
Training, United States Department of Labor, or if no such recognized agency exists in a State, are  
registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ - in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the  
above referenced payroll, payments of fringe benefits as listed in the contract have been  
or will be made to appropriate programs for the benefit of such employees, except as  
noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☐ - Each laborer or mechanic listed in the above referenced payroll has been paid, as  
indicated on the payroll, an amount not less than the sum of the applicable basic  
hourly wage rate plus the amount of the required fringe benefits as listed in the  
contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

REMARKS

Contract #GS-11-P-17-MK-C-0020, Wage Decision #DC170002 Mod 3 05/05/17, Payroll #6

NAME AND TITLE:

(b) (6)

SIGNATURE:

(b) (6)

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR  
SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE  
31 OF THE UNITED STATES CODE.



# PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage DC170002 (Mod. 3) Det:		ADDRESS 2320 Old Washington Road Waldorf, MD 20601	
Atlantic Refinishing & Restoration, Inc.					
PAYROLL NO. 7.0		FOR WEEK ENDING 09/09/2018		PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.	
				PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020	

(1)  NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2)  NO. OF WITH-HOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST, OT or DT	(4) DAY AND DATE							(5)  TOTAL HOURS	(6)  RATE OF PAY	(7)  GROSS AMOUNT EARNED	(8) DEDUCTIONS						(9)  NET WAGES PAID FOR WEEK/ Check No.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																													
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While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Date September 14th,  
2018

I, (b) (6) (b) (6)  
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company on the  
Inc.) (Contractor or Subcontractor)

St. Elizabeths West Campus Building 54; that during the payroll period commencing on the  
(Building or Work)

3rd day of September, 2018, and ending the 9th day of September, 2018

all persons employed on said project have been paid the full weekly wages earned, that no rebates  
have been or will be made either directly or indirectly to or no behalf of said

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company from the full  
Inc.) (Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly  
from the full wages earned by any person, other than permissible deductions as defined in Regulations,  
Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48  
Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

FICA, FWH, Medicare, State Tax, Other

(2) That any payrolls otherwise under this contract required to be submitted for the above period are  
correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the  
applicable wage rates contained in any wage determination incorporated into the contract; that the  
classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship  
program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and  
Training, United States Department of Labor, or if no such recognized agency exists in a State, are  
registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ - in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the  
above referenced payroll, payments of fringe benefits as listed in the contract have been  
or will be made to appropriate programs for the benefit of such employees, except as  
noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☐ - Each laborer or mechanic listed in the above referenced payroll has been paid, as  
indicated on the payroll, an amount not less than the sum of the applicable basic  
hourly wage rate plus the amount of the required fringe benefits as listed in the  
contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

REMARKS

Contract #GS-11-P-17-MK-C-0020, Wage Decision #DC170002 Mod 3 05/05/17, Payroll #7

NAME AND TITLE:

(b) (6)

SIGNATURE:

(b) (6)

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR  
SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE  
31 OF THE UNITED STATES CODE.

# PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage DC170002 (Mod. 3) Det:		ADDRESS 2320 Old Washington Road Waldorf, MD 20601	
Atlantic Refinishing & Restoration, Inc.					
PAYROLL NO. 8.0		FOR WEEK ENDING 09/16/2018		PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.	
				PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020	

(1)  NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2)  NO. OF WITH-HOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST, OT or DT	(4) DAY AND DATE							(5)  TOTAL HOURS	(6)  RATE	(7)  GROSS AMOUNT	(8) DEDUCTIONS						(9)  NET WAGES PAID FOR WEEK/ Check No.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																													
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While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

# PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage DC170002 (Mod. 3) Det:		ADDRESS 2320 Old Washington Road Waldorf, MD 20601	
Atlantic Refinishing & Restoration, Inc.					
PAYROLL NO. 8.0		FOR WEEK ENDING 09/16/2018		PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.	
				PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020	

(1)  NAME, ADDRESS, AND Identification Number	(2)  NO. OF WITHHOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST, OT or DT	(4) DAY AND DATE							(5)  TOTAL HOURS	(6)  RATE OF PAY	(7)  GROSS AMOUNT EARNED	(8) DEDUCTIONS						(9)  NET WAGES PAID FOR WEEK/ Check No.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																								
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While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Date September 19th,  
2018

I, (b) (6) (b) (6)  
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company on the  
Inc.) (Contractor or Subcontractor)

St. Elizabeths West Campus Building 54; that during the payroll period commencing on the  
(Building or Work)

10th day of September, 2018, and ending the 16th day of September, 2018

all persons employed on said project have been paid the full weekly wages earned, that no rebates  
have been or will be made either directly or indirectly to or no behalf of said

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company from the full  
Inc.) (Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly  
from the full wages earned by any person, other than permissible deductions as defined in Regulations,  
Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48  
Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

FICA, FWH, Medicare, State Tax, Other

(2) That any payrolls otherwise under this contract required to be submitted for the above period are  
correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the  
applicable wage rates contained in any wage determination incorporated into the contract; that the  
classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship  
program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and  
Training, United States Department of Labor, or if no such recognized agency exists in a State, are  
registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ - in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the  
above referenced payroll, payments of fringe benefits as listed in the contract have been  
or will be made to appropriate programs for the benefit of such employees, except as  
noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☐ - Each laborer or mechanic listed in the above referenced payroll has been paid, as  
indicated on the payroll, an amount not less than the sum of the applicable basic  
hourly wage rate plus the amount of the required fringe benefits as listed in the  
contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

REMARKS

Contract #GS-11-P-17-MK-C-0020, Wage Decision #DC170002 Mod 3 05/05/17, Payroll #8

NAME AND TITLE:

(b) (6)

SIGNATURE:

(b) (6)

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR  
SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE  
31 OF THE UNITED STATES CODE.

# PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage DC170002 (Mod. 3) Det:	ADDRESS 2320 Old Washington Road Waldorf, MD 20601
Atlantic Refinishing & Restoration, Inc.			
PAYROLL NO. 9.0	FOR WEEK ENDING 09/23/2018	PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.	PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020

(1)  NAME, ADDRESS, AND Identification Number	(2)  NO. OF WITHHOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST. OT or DT	(4) DAY AND DATE							(5)  TOTAL HOURS	(6)  RATE	(7)  GROSS AMOUNT	(8) DEDUCTIONS						(9)  NET WAGES PAID FOR WEEK/																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																														
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While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

# PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage DC170002 (Mod. 3) Det:		ADDRESS 2320 Old Washington Road Waldorf, MD 20601	
Atlantic Refinishing & Restoration, Inc.					
PAYROLL NO. 9.0		FOR WEEK ENDING 09/23/2018		PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.	
				PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020	

(1)  NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2)  NO. OF WITH-HOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST, OT or DT	(4) DAY AND DATE							(5)  TOTAL HOURS	(6)  RATE OF PAY	(7)  GROSS AMOUNT EARNED	(8) DEDUCTIONS						(9)  NET WAGES PAID FOR WEEK/ Check No.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																															
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While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Date September 28th,  
2018

I, (b) (6) (b) (6)  
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company on the  
Inc.) (Contractor or Subcontractor)

St. Elizabeths West Campus Building 54; that during the payroll period commencing on the  
(Building or Work)

17th day of September, 2018, and ending the 23rd day of September, 2018

all persons employed on said project have been paid the full weekly wages earned, that no rebates  
have been or will be made either directly or indirectly to or no behalf of said

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company from the full  
Inc.) (Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly  
from the full wages earned by any person, other than permissible deductions as defined in Regulations,  
Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48  
Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

FICA, FWH, Medicare, State Tax, Other

(2) That any payrolls otherwise under this contract required to be submitted for the above period are  
correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the  
applicable wage rates contained in any wage determination incorporated into the contract; that the  
classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship  
program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and  
Training, United States Department of Labor, or if no such recognized agency exists in a State, are  
registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ - in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the  
above referenced payroll, payments of fringe benefits as listed in the contract have been  
or will be made to appropriate programs for the benefit of such employees, except as  
noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☐ - Each laborer or mechanic listed in the above referenced payroll has been paid, as  
indicated on the payroll, an amount not less than the sum of the applicable basic  
hourly wage rate plus the amount of the required fringe benefits as listed in the  
contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

REMARKS

Contract #GS-11-P-17-MK-C-0020, Wage Decision #DC170002 Mod 3 05/05/17, Payroll #9

NAME AND TITLE:

(b) (6)

SIGNATURE:

(b) (6)

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR  
SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE  
31 OF THE UNITED STATES CODE.



# PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage DC170002 (Mod. 3) Det:		ADDRESS 2320 Old Washington Road Waldorf, MD 20601	
Atlantic Refinishing & Restoration, Inc.					
PAYROLL NO. 10.0		FOR WEEK ENDING 09/30/2018		PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.	
				PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020	

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# PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage DC170002 (Mod. 3) Det:	ADDRESS 2320 Old Washington Road Waldorf, MD 20601	
Atlantic Refinishing & Restoration, Inc.				
PAYROLL NO. 10.0	FOR WEEK ENDING 09/30/2018	PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.		PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020

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# PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage DC170002 (Mod. 3) Det:		ADDRESS 2320 Old Washington Road Waldorf, MD 20601	
Atlantic Refinishing & Restoration, Inc.					
PAYROLL NO. 10.0		FOR WEEK ENDING 09/30/2018		PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.	
				PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020	

(1)  NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2)  NO. OF WITHHOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST. OT or DT	(4) DAY AND DATE							(5)  TOTAL HOURS	(6)  RATE	(7)  GROSS AMOUNT	(8) DEDUCTIONS						(9)  NET WAGES PAID FOR WEEK/																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																										
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Date October 5th, 2018

I, (b) (6) (b) (6)  
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company on the  
Inc.) (Contractor or Subcontractor)

St. Elizabeths West Campus Building 54 ; that during the payroll period commencing on the  
(Building or Work)

24th day of September, 2018, and ending the 30th day of September, 2018

all persons employed on said project have been paid the full weekly wages earned, that no rebates  
have been or will be made either directly or indirectly to or no behalf of said

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company from the full  
Inc.) (Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly  
from the full wages earned by any person, other than permissible deductions as defined in Regulations,  
Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48  
Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

FICA, FWH, Medicare, State Tax, Other

(2) That any payrolls otherwise under this contract required to be submitted for the above period are  
correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the  
applicable wage rates contained in any wage determination incorporated into the contract; that the  
classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship  
program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and  
Training, United States Department of Labor, or if no such recognized agency exists in a State, are  
registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ - in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the  
above referenced payroll, payments of fringe benefits as listed in the contract have been  
or will be made to appropriate programs for the benefit of such employees, except as  
noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☐ - Each laborer or mechanic listed in the above referenced payroll has been paid, as  
indicated on the payroll, an amount not less than the sum of the applicable basic  
hourly wage rate plus the amount of the required fringe benefits as listed in the  
contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

REMARKS

Contract #GS-11-P-17-MK-C-0020, Wage Decision #DC170002 Mod 3 05/05/17, Payroll #10

NAME AND TITLE:

(b) (6)

SIGNATURE:

(b) (6)

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR  
SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE  
31 OF THE UNITED STATES CODE.

# PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage DC170002 (Mod. 3) Det:		ADDRESS 2320 Old Washington Road Waldorf, MD 20601	
Atlantic Refinishing & Restoration, Inc.					
PAYROLL NO. 11.0		FOR WEEK ENDING 10/07/2018		PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.	
				PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020	

(1)  NAME, ADDRESS, AND Identification Number	(2)  NO. OF WITHHOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST, OT or DT	(4) DAY AND DATE							(5)  TOTAL HOURS	(6)	(7)  GROSS	(8) DEDUCTIONS						(9)  NET WAGES PAID FOR WEEK/																	
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While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

# PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage DC170002 (Mod. 3) Det:	ADDRESS 2320 Old Washington Road Waldorf, MD 20601	
PAYROLL NO. 11.0		FOR WEEK ENDING 10/07/2018	PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.	PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020

(1)  NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2)  NO. OF WITHHOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST, OT or DT	(4) DAY AND DATE							(5)  TOTAL HOURS	(6)  RATE OF PAY	(7)  GROSS AMOUNT	(8) DEDUCTIONS						(9)  NET WAGES PAID FOR WEEK/ Check No.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																					
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# PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/> Wage DC170002 (Mod. 3) Det:		ADDRESS 2320 Old Washington Road Waldorf, MD 20601	
PAYROLL NO. 11.0		FOR WEEK ENDING 10/07/2018	PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.
		PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020	

(1)  NAME, ADDRESS, AND Identification Number	(2)  NO. OF WITH-HOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST, OT or DT	(4) DAY AND DATE							(5)  TOTAL HOURS	(6)  RATE OF PAY	(7)  GROSS AMOUNT EARNED	(8) DEDUCTIONS						(9)  NET WAGES PAID FOR WEEK/ Check No.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																							
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Date October 11th, 2018

I, (b) (6) (b) (6)  
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company on the  
Inc.) (Contractor or Subcontractor)

St. Elizabeths West Campus Building 54 ; that during the payroll period commencing on the  
(Building or Work)

1st day of October, 2018, and ending the 7th day of October, 2018

all persons employed on said project have been paid the full weekly wages earned, that no rebates  
have been or will be made either directly or indirectly to or no behalf of said

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company from the full  
Inc.) (Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly  
from the full wages earned by any person, other than permissible deductions as defined in Regulations,  
Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48  
Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

FICA, FWH, Medicare, State Tax, Other

(2) That any payrolls otherwise under this contract required to be submitted for the above period are  
correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the  
applicable wage rates contained in any wage determination incorporated into the contract; that the  
classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship  
program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and  
Training, United States Department of Labor, or if no such recognized agency exists in a State, are  
registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ - in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the  
above referenced payroll, payments of fringe benefits as listed in the contract have been  
or will be made to appropriate programs for the benefit of such employees, except as  
noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☐ - Each laborer or mechanic listed in the above referenced payroll has been paid, as  
indicated on the payroll, an amount not less than the sum of the applicable basic  
hourly wage rate plus the amount of the required fringe benefits as listed in the  
contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

REMARKS

Contract #GS-11-P-17-MK-C-0020, Wage Decision #DC170002 Mod 3 05/05/17, Payroll #11

NAME AND TITLE:

(b) (6)

SIGNATURE:

(b) (6)

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR  
SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE  
31 OF THE UNITED STATES CODE.



# PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/> Wage DC170002 (Mod. 3) Det: Atlantic Refinishing & Restoration, Inc.		ADDRESS 2320 Old Washington Road Waldorf, MD 20601	
PAYROLL NO. 12.0	FOR WEEK ENDING 10/14/2018	PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.	PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020

(1)  NAME, ADDRESS, AND Identification Number	(2)  NO. OF WITHHOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST, OT or DT	(4) DAY AND DATE							(5)  TOTAL HOURS	(6)  RATE OF PAY	(7)  GROSS AMOUNT EARNED	(8) DEDUCTIONS						(9)  NET WAGES PAID FOR WEEK/ Check No.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																										
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# PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage DC170002 (Mod. 3) Det:		ADDRESS 2320 Old Washington Road Waldorf, MD 20601	
Atlantic Refinishing & Restoration, Inc.					
PAYROLL NO. 12.0		FOR WEEK ENDING 10/14/2018		PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.	
				PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020	

(1)  NAME, ADDRESS, AND Identification Number	(2)  NO. OF WITHHOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST, OT or DT	(4) DAY AND DATE							(5)  TOTAL HOURS	(6)  RATE	(7)  GROSS AMOUNT	(8) DEDUCTIONS						(9)  NET WAGES PAID FOR WEEK/ Check No.	
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While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Date October 18th, 2018

I, (b) (6) (b) (6)  
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company on the  
Inc.) (Contractor or Subcontractor)

St. Elizabeths West Campus Building 54 ; that during the payroll period commencing on the  
(Building or Work)

8th day of October, 2018, and ending the 14th day of October, 2018

all persons employed on said project have been paid the full weekly wages earned, that no rebates  
have been or will be made either directly or indirectly to or no behalf of said

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company from the full  
Inc.) (Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly  
from the full wages earned by any person, other than permissible deductions as defined in Regulations,  
Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48  
Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

FICA, FWH, Medicare, State Tax, Other

(2) That any payrolls otherwise under this contract required to be submitted for the above period are  
correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the  
applicable wage rates contained in any wage determination incorporated into the contract; that the  
classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship  
program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and  
Training, United States Department of Labor, or if no such recognized agency exists in a State, are  
registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ - in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the  
above referenced payroll, payments of fringe benefits as listed in the contract have been  
or will be made to appropriate programs for the benefit of such employees, except as  
noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ - Each laborer or mechanic listed in the above referenced payroll has been paid, as  
indicated on the payroll, an amount not less than the sum of the applicable basic  
hourly wage rate plus the amount of the required fringe benefits as listed in the  
contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

REMARKS

Contract #GS-11-P-17-MK-C-0020, Wage Decision #DC170002 Mod 3 05/05/17, Payroll #12

NAME AND TITLE:

(b) (6)

SIGNATURE:

(b) (6)

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR  
SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE  
31 OF THE UNITED STATES CODE.

# PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage DC170002 (Mod. 3) Det:		ADDRESS 2320 Old Washington Road Waldorf, MD 20601	
Atlantic Refinishing & Restoration, Inc.					
PAYROLL NO. 13.0		FOR WEEK ENDING 10/21/2018		PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.	
				PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020	

(1)  NAME, ADDRESS, AND Identification Number	(2)  NO. OF WITHOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST, OT or DT	(4) DAY AND DATE							(5)  TOTAL HOURS	(6)  RATE OF PAY	(7)  GROSS AMOUNT EARNED	(8) DEDUCTIONS						(9)  NET WAGES PAID FOR WEEK/ Check No.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																									
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# PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage DC170002 (Mod. 3) Det:	ADDRESS 2320 Old Washington Road Waldorf, MD 20601	
Atlantic Refinishing & Restoration, Inc.				
PAYROLL NO. 13.0	FOR WEEK ENDING 10/21/2018	PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.		PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020

(1)  NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2)  NO. OF WITHHOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST, OT or DT	(4) DAY AND DATE							(5)  TOTAL HOURS	(6)  RATE	(7)  GROSS AMOUNT	(8) DEDUCTIONS						(9)  NET WAGES PAID FOR WEEK/																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																															
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While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

# PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage DC170002 (Mod. 3) Det:		ADDRESS 2320 Old Washington Road Waldorf, MD 20601	
Atlantic Refinishing & Restoration, Inc.					
PAYROLL NO. 13.0		FOR WEEK ENDING 10/21/2018		PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.	
				PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020	

(1)  NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2)  NO. OF WITH-HOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST, OT or DT	(4) DAY AND DATE							(5)  TOTAL HOURS	(6)  RATE	(7)  GROSS AMOUNT	(8) DEDUCTIONS  * Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions						(9)  NET WAGES PAID FOR WEEK/ Check No.
				MON	TUE	WED	THU	FRI	SAT	SUN										
				15	16	17	18	19	20	21										
				HOURS WORKED EACH DAY																
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			S	8.00	0	0	0	0	0	0	8.00									

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Date October 29th, 2018

I, (b) (6) (b) (6)  
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company on the  
Inc.) (Contractor or Subcontractor)

St. Elizabeths West Campus Building 54 ; that during the payroll period commencing on the  
(Building or Work)

15th day of October, 2018, and ending the 21st day of October, 2018

all persons employed on said project have been paid the full weekly wages earned, that no rebates  
have been or will be made either directly or indirectly to or no behalf of said

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company from the full  
Inc.) (Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly  
from the full wages earned by any person, other than permissible deductions as defined in Regulations,  
Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48  
Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

FICA, FWH, Medicare, State Tax, Other

(2) That any payrolls otherwise under this contract required to be submitted for the above period are  
correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the  
applicable wage rates contained in any wage determination incorporated into the contract; that the  
classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship  
program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and  
Training, United States Department of Labor, or if no such recognized agency exists in a State, are  
registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ - in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the  
above referenced payroll, payments of fringe benefits as listed in the contract have been  
or will be made to appropriate programs for the benefit of such employees, except as  
noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ - Each laborer or mechanic listed in the above referenced payroll has been paid, as  
indicated on the payroll, an amount not less than the sum of the applicable basic  
hourly wage rate plus the amount of the required fringe benefits as listed in the  
contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

REMARKS

Contract #GS-11-P-17-MK-C-0020, Wage Decision #DC170002 Mod 3 05/05/17, Payroll #13

NAME AND TITLE:

(b) (6)

SIGNATURE:

(b) (6)

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR  
SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE  
31 OF THE UNITED STATES CODE.

# PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage DC170002 (Mod. 3) Det:		ADDRESS 2320 Old Washington Road Waldorf, MD 20601	
Atlantic Refinishing & Restoration, Inc.					
PAYROLL NO. 14.0		FOR WEEK ENDING 10/28/2018		PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.	
				PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020	

(1)  NAME, ADDRESS, AND Identification Number	(2)  NO. OF WITHHOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST, OT or DT	(4) DAY AND DATE							(5)  TOTAL HOURS	(6)  RATE	(7)  GROSS AMOUNT	(8) DEDUCTIONS						(9)  NET WAGES PAID FOR WEEK/																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																														
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While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.



# PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage DC170002 (Mod. 3) Det:		ADDRESS 2320 Old Washington Road Waldorf, MD 20601	
Atlantic Refinishing & Restoration, Inc.					
PAYROLL NO. 14.0		FOR WEEK ENDING 10/28/2018		PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.	
				PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020	

(1)  NAME, ADDRESS, AND Identification Number	(2)  NO. OF WITHHOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST, OT or DT	(4) DAY AND DATE							(5)  TOTAL HOURS	(6)  RATE	(7)  GROSS AMOUNT	(8) DEDUCTIONS						(9)  NET WAGES PAID FOR WEEK/																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																											
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While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Date November 2nd, 2018

I, (b) (6) (b) (6)  
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company on the  
Inc.) (Contractor or Subcontractor)

St. Elizabeths West Campus Building 54 ; that during the payroll period commencing on the  
(Building or Work)

22nd day of October, 2018, and ending the 28th day of October, 2018

all persons employed on said project have been paid the full weekly wages earned, that no rebates  
have been or will be made either directly or indirectly to or no behalf of said

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company from the full  
Inc.) (Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly  
from the full wages earned by any person, other than permissible deductions as defined in Regulations,  
Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48  
Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

FICA, FWH, Medicare, State Tax, Other

(2) That any payrolls otherwise under this contract required to be submitted for the above period are  
correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the  
applicable wage rates contained in any wage determination incorporated into the contract; that the  
classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship  
program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and  
Training, United States Department of Labor, or if no such recognized agency exists in a State, are  
registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ - in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the  
above referenced payroll, payments of fringe benefits as listed in the contract have been  
or will be made to appropriate programs for the benefit of such employees, except as  
noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☐ - Each laborer or mechanic listed in the above referenced payroll has been paid, as  
indicated on the payroll, an amount not less than the sum of the applicable basic  
hourly wage rate plus the amount of the required fringe benefits as listed in the  
contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

REMARKS

Contract #GS-11-P-17-MK-C-0020, Wage Decision #DC170002 Mod 3 05/05/17, Payroll #14

NAME AND TITLE:

(b) (6)

SIGNATURE:

(b) (6)

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR  
SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE  
31 OF THE UNITED STATES CODE.

# PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage DC170002 (Mod. 3) Det:	ADDRESS 2320 Old Washington Road Waldorf, MD 20601	
Atlantic Refinishing & Restoration, Inc.				
PAYROLL NO. 15.0	FOR WEEK ENDING 11/04/2018	PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.		PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020

(1)  NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2)  NO. OF WITHHOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST, OT or DT	(4) DAY AND DATE							(5)  TOTAL HOURS	(6)  RATE	(7)  GROSS AMOUNT	(8) DEDUCTIONS						(9)  NET WAGES PAID FOR WEEK/																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																	
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While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

# PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage DC170002 (Mod. 3) Det:		ADDRESS 2320 Old Washington Road Waldorf, MD 20601	
Atlantic Refinishing & Restoration, Inc.					
PAYROLL NO. 15.0		FOR WEEK ENDING 11/04/2018		PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.	
				PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020	

(1)  NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2)  NO. OF WITH-HOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST, OT or DT	(4) DAY AND DATE							(5)  TOTAL HOURS	(6)  RATE	(7)  GROSS AMOUNT	(8) DEDUCTIONS						(9)  NET WAGES PAID FOR WEEK/	
				MON	TUE	WED	THU	FRI	SAT	SUN				* Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions							
				29	30	31	1	2	3	4					WITH- HOLDING						TOTAL
				HOURS WORKED EACH DAY																	
(b) (6)	1	Bricklayer:	D	0	0	0	0	0	0	0	0.00	(b) (4)									
			O	0	0	0	0	0	0	0	0.00										
			S	8.00	8.00	8.00	8.00	8.00	0	0	40.00										

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Date November 8th, 2018

I, (b) (6) (b) (6)  
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company on the  
Inc.) (Contractor or Subcontractor)

St. Elizabeths West Campus Building 54 ; that during the payroll period commencing on the  
(Building or Work)

29th day of October, 2018, and ending the 4th day of November, 2018

all persons employed on said project have been paid the full weekly wages earned, that no rebates  
have been or will be made either directly or indirectly to or no behalf of said

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company from the full  
Inc.) (Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly  
from the full wages earned by any person, other than permissible deductions as defined in Regulations,  
Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48  
Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

FICA, FWH, Medicare, State Tax, Other

(2) That any payrolls otherwise under this contract required to be submitted for the above period are  
correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the  
applicable wage rates contained in any wage determination incorporated into the contract; that the  
classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship  
program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and  
Training, United States Department of Labor, or if no such recognized agency exists in a State, are  
registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ - in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the  
above referenced payroll, payments of fringe benefits as listed in the contract have been  
or will be made to appropriate programs for the benefit of such employees, except as  
noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☐ - Each laborer or mechanic listed in the above referenced payroll has been paid, as  
indicated on the payroll, an amount not less than the sum of the applicable basic  
hourly wage rate plus the amount of the required fringe benefits as listed in the  
contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

REMARKS

Contract #GS-11-P-17-MK-C-0020, Wage Decision #DC170002 Mod 3 05/05/17, Payroll #15

NAME AND TITLE:

(b) (6)

SIGNATURE:

(b) (6)

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR  
SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE  
31 OF THE UNITED STATES CODE.

# PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/> Wage DC170002 (Mod. 3) Det:		ADDRESS 2320 Old Washington Road Waldorf, MD 20601	
Atlantic Refinishing & Restoration, Inc.			
PAYROLL NO. 16.0	FOR WEEK ENDING 11/11/2018	PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.	PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020

(1)  NAME, ADDRESS, AND Identification Number	(2)  NO. OF WITH-HOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST, OT or DT	(4) DAY AND DATE							(5)  TOTAL HOURS	(6)  RATE	(7)  GROSS AMOUNT	(8) DEDUCTIONS						(9)  NET WAGES PAID FOR WEEK/ Check No.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																										
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While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

# PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage DC170002 (Mod. 3) Det:		ADDRESS 2320 Old Washington Road Waldorf, MD 20601	
Atlantic Refinishing & Restoration, Inc.					
PAYROLL NO. 16.0		FOR WEEK ENDING 11/11/2018		PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.	
				PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020	

(1)	(2)	(3)	ST, OT or DT	(4) DAY AND DATE							(5)	(6)	(7)	(8)						(9)																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																								
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While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Date November 16th,  
2018

I, (b) (6) (b) (6)  
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company on the  
Inc.) (Contractor or Subcontractor)

St. Elizabeths West Campus Building 54; that during the payroll period commencing on the  
(Building or Work)

5th day of November, 2018, and ending the 11th day of November, 2018

all persons employed on said project have been paid the full weekly wages earned, that no rebates  
have been or will be made either directly or indirectly to or no behalf of said

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company from the full  
Inc.) (Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly  
from the full wages earned by any person, other than permissible deductions as defined in Regulations,  
Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48  
Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

FICA, FWH, Medicare, State Tax, Other

(2) That any payrolls otherwise under this contract required to be submitted for the above period are  
correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the  
applicable wage rates contained in any wage determination incorporated into the contract; that the  
classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship  
program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and  
Training, United States Department of Labor, or if no such recognized agency exists in a State, are  
registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ - in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the  
above referenced payroll, payments of fringe benefits as listed in the contract have been  
or will be made to appropriate programs for the benefit of such employees, except as  
noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☐ - Each laborer or mechanic listed in the above referenced payroll has been paid, as  
indicated on the payroll, an amount not less than the sum of the applicable basic  
hourly wage rate plus the amount of the required fringe benefits as listed in the  
contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

REMARKS

Contract #GS-11-P-17-MK-C-0020, Wage Decision #DC170002 Mod 3 05/05/17, Payroll #16

NAME AND TITLE:

(b) (6)

SIGNATURE:

(b) (6)

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR  
SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE  
31 OF THE UNITED STATES CODE.



# PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage DC170002 (Mod. 3) Det:		ADDRESS 2320 Old Washington Road Waldorf, MD 20601		
Atlantic Refinishing & Restoration, Inc.						
PAYROLL NO. 17.0		FOR WEEK ENDING 11/18/2018		PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.		PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020

(1)  NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2)  NO. OF WITH-HOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST, OT or DT	(4) DAY AND DATE							(5)  TOTAL HOURS	(6)  RATE	(7)  GROSS AMOUNT	(8) DEDUCTIONS						(9)  NET WAGES PAID FOR WEEK/ Check No.	
				MON	TUE	WED	THU	FRI	SAT	SUN				* Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions							
				12	13	14	15	16	17	18					WITH- HOLDING						TOTAL
				HOURS WORKED EACH DAY																	
(b) (6)	1	Laborer: Common/General	D	0	0	0	0	0	0	0	0.00	(b) (4)									
			O	0	0	0	0	0	0	0	0.00										
			S	0	8.00	0	0	0	0	0	8.00										
	0	Bricklayer:	D	0	0	0	0	0	0	0	0.00										
			O	0	0	0	0	0	0	0	0.00										
			S	8.00	8.00	8.00	0	0	0	0	24.00										
	1	Bricklayer:	D	0	0	0	0	0	0	0	0.00										
			O	0	0	0	0	0	0	0	0.00										
			S	0	0	8.00	0	0	0	0	8.00										

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Date November 30th,  
2018

I, (b) (6) (b) (6)  
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company on the  
Inc.) (Contractor or Subcontractor)

St. Elizabeths West Campus Building 54; that during the payroll period commencing on the  
(Building or Work)

12th day of November, 2018, and ending the 18th day of November, 2018

all persons employed on said project have been paid the full weekly wages earned, that no rebates  
have been or will be made either directly or indirectly to or no behalf of said

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company from the full  
Inc.) (Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly  
from the full wages earned by any person, other than permissible deductions as defined in Regulations,  
Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48  
Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

FICA, FWH, Medicare, State Tax, Other

(2) That any payrolls otherwise under this contract required to be submitted for the above period are  
correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the  
applicable wage rates contained in any wage determination incorporated into the contract; that the  
classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship  
program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and  
Training, United States Department of Labor, or if no such recognized agency exists in a State, are  
registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ - in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the  
above referenced payroll, payments of fringe benefits as listed in the contract have been  
or will be made to appropriate programs for the benefit of such employees, except as  
noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☐ - Each laborer or mechanic listed in the above referenced payroll has been paid, as  
indicated on the payroll, an amount not less than the sum of the applicable basic  
hourly wage rate plus the amount of the required fringe benefits as listed in the  
contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

REMARKS

Contract #GS-11-P-17-MK-C-0020, Wage Decision #DC170002 Mod 3 05/05/17, Payroll #17

NAME AND TITLE:

(b) (6)

SIGNATURE:

(b) (6)

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR  
SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE  
31 OF THE UNITED STATES CODE.

Date November 30th,  
2018

I, (b) (6) (b) (6)  
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company on the  
Inc.) (Contractor or Subcontractor)

St. Elizabeths West Campus Building 54; that during the payroll period commencing on the  
(Building or Work)

19th day of November, 2018, and ending the 25th day of November, 2018

all persons employed on said project have been paid the full weekly wages earned, that no rebates  
have been or will be made either directly or indirectly to or no behalf of said

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company from the full  
Inc.) (Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly  
from the full wages earned by any person, other than permissible deductions as defined in Regulations,  
Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48  
Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

(2) That any payrolls otherwise under this contract required to be submitted for the above period are  
correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the  
applicable wage rates contained in any wage determination incorporated into the contract; that the  
classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship  
program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and  
Training, United States Department of Labor, or if no such recognized agency exists in a State, are  
registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ - in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the  
above referenced payroll, payments of fringe benefits as listed in the contract have been  
or will be made to appropriate programs for the benefit of such employees, except as  
noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☐ - Each laborer or mechanic listed in the above referenced payroll has been paid, as  
indicated on the payroll, an amount not less than the sum of the applicable basic  
hourly wage rate plus the amount of the required fringe benefits as listed in the  
contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

REMARKS

Contract #GS-11-P-17-MK-C-0020, ,Payroll #18Payroll #18 - No Work Performed

NAME AND TITLE:

(b) (6)

SIGNATURE:

(b) (6)

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR  
SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE  
31 OF THE UNITED STATES CODE.

# PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage DC170002 (Mod. 3) Det:		ADDRESS 2320 Old Washington Road Waldorf, MD 20601	
Atlantic Refinishing & Restoration, Inc.					
PAYROLL NO. 19.0		FOR WEEK ENDING 12/02/2018		PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.	
				PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020	

(1)  NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2)  NO. OF WITHHOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST, OT or DT	(4) DAY AND DATE							(5)  TOTAL HOURS	(6)  RATE OF PAY	(7)  GROSS AMOUNT EARNED	(8) DEDUCTIONS  * Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions						(9)  NET WAGES PAID FOR WEEK/ Check No.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																															
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While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Date December 7th, 2018

I, (b) (6) (b) (6)  
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company on the  
Inc.) (Contractor or Subcontractor)

St. Elizabeths West Campus Building 54 ; that during the payroll period commencing on the  
(Building or Work)

26th day of November, 2018, and ending the 2nd day of December, 2018

all persons employed on said project have been paid the full weekly wages earned, that no rebates  
have been or will be made either directly or indirectly to or no behalf of said

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company from the full  
Inc.) (Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly  
from the full wages earned by any person, other than permissible deductions as defined in Regulations,  
Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48  
Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

FICA, FWH, Medicare, State Tax, Other

(2) That any payrolls otherwise under this contract required to be submitted for the above period are  
correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the  
applicable wage rates contained in any wage determination incorporated into the contract; that the  
classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship  
program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and  
Training, United States Department of Labor, or if no such recognized agency exists in a State, are  
registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ - in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the  
above referenced payroll, payments of fringe benefits as listed in the contract have been  
or will be made to appropriate programs for the benefit of such employees, except as  
noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☐ - Each laborer or mechanic listed in the above referenced payroll has been paid, as  
indicated on the payroll, an amount not less than the sum of the applicable basic  
hourly wage rate plus the amount of the required fringe benefits as listed in the  
contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

REMARKS

Contract #GS-11-P-17-MK-C-0020, Wage Decision #DC170002 Mod 3 05/05/17, Payroll #19

NAME AND TITLE:

(b) (6)

SIGNATURE:

(b) (6)

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR  
SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE  
31 OF THE UNITED STATES CODE.

# PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage DC170002 (Mod. 3) Det:		ADDRESS 2320 Old Washington Road Waldorf, MD 20601	
Atlantic Refinishing & Restoration, Inc.					
PAYROLL NO. 20.0		FOR WEEK ENDING 12/09/2018		PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.	
				PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020	

(1)  NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2)  NO. OF WITH-HOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST, OT or DT	(4) DAY AND DATE							(5)  TOTAL HOURS	(6)  RATE	(7)  GROSS AMOUNT	(8) DEDUCTIONS						(9)  NET WAGES PAID FOR WEEK/ Check No.	
				MON	TUE	WED	THU	FRI	SAT	SUN				* Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions							
				3	4	5	6	7	8	9					WITH- HOLDING						TOTAL
				HOURS WORKED EACH DAY																	
(b) (6)	1	Laborer: Common/General	D	0	0	0	0	0	0	0	0.00	(b) (4)									
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While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Date December 13th,  
2018

I, (b) (6) (b) (6)  
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company on the  
Inc.) (Contractor or Subcontractor)

St. Elizabeths West Campus Building 54; that during the payroll period commencing on the  
(Building or Work)

3rd day of December, 2018, and ending the 9th day of December, 2018

all persons employed on said project have been paid the full weekly wages earned, that no rebates  
have been or will be made either directly or indirectly to or no behalf of said

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company from the full  
Inc.) (Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly  
from the full wages earned by any person, other than permissible deductions as defined in Regulations,  
Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48  
Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

FICA, FWH, Medicare, State Tax

(2) That any payrolls otherwise under this contract required to be submitted for the above period are  
correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the  
applicable wage rates contained in any wage determination incorporated into the contract; that the  
classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship  
program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and  
Training, United States Department of Labor, or if no such recognized agency exists in a State, are  
registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ - in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the  
above referenced payroll, payments of fringe benefits as listed in the contract have been  
or will be made to appropriate programs for the benefit of such employees, except as  
noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☐ - Each laborer or mechanic listed in the above referenced payroll has been paid, as  
indicated on the payroll, an amount not less than the sum of the applicable basic  
hourly wage rate plus the amount of the required fringe benefits as listed in the  
contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

REMARKS

Contract #GS-11-P-17-MK-C-0020, Wage Decision #DC170002 Mod 3 05/05/17, Payroll #20

NAME AND TITLE:

(b) (6)

SIGNATURE:

(b) (6)

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR  
SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE  
31 OF THE UNITED STATES CODE.

# PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage DC170002 (Mod. 3) Det:	ADDRESS 2320 Old Washington Road Waldorf, MD 20601
Atlantic Refinishing & Restoration, Inc.			
PAYROLL NO. 21.1	FOR WEEK ENDING 12/16/2018	PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.	PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020

(1)  NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2)  NO. OF WITH-HOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST, OT or DT	(4) DAY AND DATE							(5)  TOTAL HOURS	(6)  RATE	(7)  GROSS AMOUNT	(8) DEDUCTIONS						(9)  NET WAGES PAID FOR WEEK/																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																
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While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.



# PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage DC170002 (Mod. 3) Det:		ADDRESS 2320 Old Washington Road Waldorf, MD 20601	
Atlantic Refinishing & Restoration, Inc.					
PAYROLL NO. 21.1		FOR WEEK ENDING 12/16/2018		PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.	
				PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020	

(1)  NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2)  NO. OF WITHHOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST, OT or DT	(4) DAY AND DATE							(5)  TOTAL HOURS	(6)  RATE	(7)  GROSS AMOUNT	(8) DEDUCTIONS  * Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions						(9)  NET WAGES PAID FOR WEEK/																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																							
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Date December 28th,  
2018

I, (b) (6) (b) (6)  
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company on the  
Inc.) (Contractor or Subcontractor)

St. Elizabeths West Campus Building 54; that during the payroll period commencing on the  
(Building or Work)

10th day of December, 2018, and ending the 16th day of December, 2018

all persons employed on said project have been paid the full weekly wages earned, that no rebates  
have been or will be made either directly or indirectly to or no behalf of said

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company from the full  
Inc.) (Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly  
from the full wages earned by any person, other than permissible deductions as defined in Regulations,  
Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48  
Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

FICA, FWH, Medicare, State Tax, Health & Dental Insurance, Other

(2) That any payrolls otherwise under this contract required to be submitted for the above period are  
correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the  
applicable wage rates contained in any wage determination incorporated into the contract; that the  
classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship  
program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and  
Training, United States Department of Labor, or if no such recognized agency exists in a State, are  
registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ - in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the  
above referenced payroll, payments of fringe benefits as listed in the contract have been  
or will be made to appropriate programs for the benefit of such employees, except as  
noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☐ - Each laborer or mechanic listed in the above referenced payroll has been paid, as  
indicated on the payroll, an amount not less than the sum of the applicable basic  
hourly wage rate plus the amount of the required fringe benefits as listed in the  
contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

REMARKS

Contract #GS-11-P-17-MK-C-0020, Wage Decision #DC170002 Mod 3 05/05/17, Revised  
Payroll #21.1-Entries were wrong.

NAME AND TITLE:

(b) (6)

SIGNATURE:

(b) (6)

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR  
SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE  
31 OF THE UNITED STATES CODE.

# PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage DC170002 (Mod. 3) Det:		ADDRESS 2320 Old Washington Road Waldorf, MD 20601	
Atlantic Refinishing & Restoration, Inc.					
PAYROLL NO. 22.0		FOR WEEK ENDING 12/23/2018		PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.	
				PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020	

(1)  NAME, ADDRESS, AND Identification Number	(2)  NO. OF WITH-HOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST, OT or DT	(4) DAY AND DATE							(5)  TOTAL HOURS	(6)  RATE	(7)  GROSS AMOUNT	(8) DEDUCTIONS						(9)  NET WAGES PAID FOR WEEK/																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																			
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While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

# PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage DC170002 (Mod. 3) Det:		ADDRESS 2320 Old Washington Road Waldorf, MD 20601	
Atlantic Refinishing & Restoration, Inc.					
PAYROLL NO. 22.0		FOR WEEK ENDING 12/23/2018		PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.	
				PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020	

(1)  NAME, ADDRESS, AND Identification Number	(2)  NO. OF WITHHOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST, OT or DT	(4) DAY AND DATE							(5)  TOTAL HOURS	(6)  RATE OF PAY	(7)  GROSS AMOUNT	(8) DEDUCTIONS						(9)  NET WAGES PAID FOR WEEK/ Check No.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																						
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While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Date December 28th,  
2018

I, (b) (6) (b) (6)  
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company on the  
Inc.) (Contractor or Subcontractor)

St. Elizabeths West Campus Building 54; that during the payroll period commencing on the  
(Building or Work)

17th day of December, 2018, and ending the 23rd day of December, 2018

all persons employed on said project have been paid the full weekly wages earned, that no rebates  
have been or will be made either directly or indirectly to or no behalf of said

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company from the full  
Inc.) (Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly  
from the full wages earned by any person, other than permissible deductions as defined in Regulations,  
Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48  
Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

FICA, FWH, Medicare, State Tax, Other

(2) That any payrolls otherwise under this contract required to be submitted for the above period are  
correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the  
applicable wage rates contained in any wage determination incorporated into the contract; that the  
classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship  
program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and  
Training, United States Department of Labor, or if no such recognized agency exists in a State, are  
registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ - in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the  
above referenced payroll, payments of fringe benefits as listed in the contract have been  
or will be made to appropriate programs for the benefit of such employees, except as  
noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ - Each laborer or mechanic listed in the above referenced payroll has been paid, as  
indicated on the payroll, an amount not less than the sum of the applicable basic  
hourly wage rate plus the amount of the required fringe benefits as listed in the  
contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

REMARKS

Contract #GS-11-P-17-MK-C-0020, Wage Decision #DC170002 Mod 3 05/05/17, Payroll #22

NAME AND TITLE:

(b) (6)

SIGNATURE:

(b) (6)

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR  
SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE  
31 OF THE UNITED STATES CODE.

Date January 17th, 2019

I, (b) (6) (b) (6)  
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company on the  
Inc.) (Contractor or Subcontractor)

St. Elizabeths West Campus Building 54 ; that during the payroll period commencing on the  
(Building or Work)

24th day of December, 2018, and ending the 30th day of December, 2018

all persons employed on said project have been paid the full weekly wages earned, that no rebates  
have been or will be made either directly or indirectly to or no behalf of said

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company from the full  
Inc.) (Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly  
from the full wages earned by any person, other than permissible deductions as defined in Regulations,  
Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48  
Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

(2) That any payrolls otherwise under this contract required to be submitted for the above period are  
correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the  
applicable wage rates contained in any wage determination incorporated into the contract; that the  
classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship  
program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and  
Training, United States Department of Labor, or if no such recognized agency exists in a State, are  
registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ - in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the  
above referenced payroll, payments of fringe benefits as listed in the contract have been  
or will be made to appropriate programs for the benefit of such employees, except as  
noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☐ - Each laborer or mechanic listed in the above referenced payroll has been paid, as  
indicated on the payroll, an amount not less than the sum of the applicable basic  
hourly wage rate plus the amount of the required fringe benefits as listed in the  
contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

REMARKS

Contract #GS-11-P-17-MK-C-0020, Payroll #23 Payroll #23 - No Work Performed

NAME AND TITLE:

(b) (6)

SIGNATURE:

(b) (6)

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR  
SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE  
31 OF THE UNITED STATES CODE.

# PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/> Wage DC170002 (Mod. 3) Det:		ADDRESS 2320 Old Washington Road Waldorf, MD 20601	
PAYROLL NO. 24.0		FOR WEEK ENDING 01/06/2019	PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.
		PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020	

(1)  NAME, ADDRESS, AND Identification Number	(2)  NO. OF WITHHOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST, OT or DT	(4) DAY AND DATE							(5)  TOTAL HOURS	(6)  RATE OF PAY	(7)  GROSS AMOUNT EARNED	(8) DEDUCTIONS						(9)  NET WAGES PAID FOR WEEK/ Check No.
				MON	TUE	WED	THU	FRI	SAT	SUN				* Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions						
				31	1	2	3	4	5	6				FICA	WITH- HOLDING TAX	SWH	Medicare	OTHER*	TOTAL DEDUCTIONS	
				HOURS WORKED EACH DAY																
(b) (6)	5	Laborer: Common/General	D	0	0	0	0	0	0	0	0.00	(b) (4)								
			O	0	0	0	0	0	0	0	0.00									
			S	0	0	0	0	8.00	0	0	8.00									
	1	Laborer: Common/General	D	0	0	0	0	0	0	0	0.00									
			O	0	0	0	0	0	0	0	0.00									
			S	0	0	0	0	8.00	0	0	8.00									
	1	Bricklayer:	D	0	0	0	0	0	0	0	0.00									
			O	0	0	0	0	0	0	0	0.00									
			S	0	0	0	0	8.00	0	0	8.00									
	1	Laborer: Common/General	D	0	0	0	0	0	0	0	0.00									
			O	0	0	0	0	0	0	0	0.00									
			S	0	0	0	0	8.00	0	0	8.00									

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

# PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage DC170002 (Mod. 3) Det:		ADDRESS 2320 Old Washington Road Waldorf, MD 20601	
Atlantic Refinishing & Restoration, Inc.					
PAYROLL NO. 24.0		FOR WEEK ENDING 01/06/2019		PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.	
				PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020	

(1)  NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2)  NO. OF WITH-HOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST, OT or DT	(4) DAY AND DATE							(5)  TOTAL HOURS	(6)  RATE OF PAY	(7)  GROSS AMOUNT EARNED	(8) DEDUCTIONS						(9)  NET WAGES PAID FOR WEEK/ Check No.
				* Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions																
				MON	TUE	WED	THU	FRI	SAT	SUN				FICA	WITH- HOLDING TAX	SWH	Medicare	OTHER*	TOTAL DEDUCTIONS	
				31	1	2	3	4	5	6										
HOURS WORKED EACH DAY																				
(b) (6)	1	Bricklayer:	D	0	0	0	0	0	0	0	0.00	(b) (4)								
			O	0	0	0	0	0	0	0	0.00									
			S	0	0	0	0	8.00	0	0	8.00									

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.



Date January 17th, 2019

I, (b) (6) (b) (6)  
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company on the  
Inc.) (Contractor or Subcontractor)

St. Elizabeths West Campus Building 54 ; that during the payroll period commencing on the  
(Building or Work)

31st day of December, 2018, and ending the 6th day of January, 2019

all persons employed on said project have been paid the full weekly wages earned, that no rebates  
have been or will be made either directly or indirectly to or no behalf of said

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company from the full  
Inc.) (Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly  
from the full wages earned by any person, other than permissible deductions as defined in Regulations,  
Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48  
Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

FICA, FWH, Medicare, State Tax, Other

(2) That any payrolls otherwise under this contract required to be submitted for the above period are  
correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the  
applicable wage rates contained in any wage determination incorporated into the contract; that the  
classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship  
program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and  
Training, United States Department of Labor, or if no such recognized agency exists in a State, are  
registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ - in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the  
above referenced payroll, payments of fringe benefits as listed in the contract have been  
or will be made to appropriate programs for the benefit of such employees, except as  
noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☐ - Each laborer or mechanic listed in the above referenced payroll has been paid, as  
indicated on the payroll, an amount not less than the sum of the applicable basic  
hourly wage rate plus the amount of the required fringe benefits as listed in the  
contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

REMARKS

Contract #GS-11-P-17-MK-C-0020, Wage Decision #DC170002 Mod 3 05/05/17, Payroll #24

NAME AND TITLE:

(b) (6)

SIGNATURE:

(b) (6)

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR  
SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE  
31 OF THE UNITED STATES CODE.

# PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage DC170002 (Mod. 3) Det:	ADDRESS 2320 Old Washington Road Waldorf, MD 20601	
Atlantic Refinishing & Restoration, Inc.				
PAYROLL NO. 25.0	FOR WEEK ENDING 01/13/2019	PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.		PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020

(1)  NAME, ADDRESS, AND Identification Number	(2)  NO OF WITHHOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST, OT or DT	(4) DAY AND DATE							(5)  TOTAL HOURS	(6)  RATE	(7)  GROSS AMOUNT	(8) DEDUCTIONS						(9)  NET WAGES PAID FOR WEEK/	
				* Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions																	
				MON	TUE	WED	THU	FRI	SAT	SUN					WITH- HOLDING						TOTAL
				7	8	9	10	11	12	13											
HOURS WORKED EACH DAY																					
(b) (6)	5	Laborer: Common/General	D	0	0	0	0	0	0	0	0	0.00	(b) (4)								
			O	0	0	0	0	0	0	0	0	0.00									
			S	8.00	8.00	8.00	8.00	0	0	0	32.00										
	1	Laborer: Common/General	D	0	0	0	0	0	0	0	0.00										
			O	0	0	0	0	0	0	0	0.00										
			S	8.00	8.00	8.00	8.00	8.00	0	0	40.00										
	1	Laborer: Common/General	D	0	0	0	0	0	0	0	0.00										
			O	0	0	0	0	0	0	0	0.00										
			S	0	3.25	0	0	0	0	0	3.25										
	1	Laborer: Common/General	D	0	0	0	0	0	0	0	0.00										
			O	0	0	0	0	0	0	0	0.00										
			S	0	4.25	0	0	0	0	0	4.25										

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

# PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage DC170002 (Mod. 3) Det:		ADDRESS 2320 Old Washington Road Waldorf, MD 20601	
Atlantic Refinishing & Restoration, Inc.					
PAYROLL NO. 25.0		FOR WEEK ENDING 01/13/2019		PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.	
				PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020	

(1)  NAME, ADDRESS, AND Identification Number	(2)  NO. OF WITH-HOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST. OT or DT	(4) DAY AND DATE							(5)  TOTAL HOURS	(6)  RATE	(7)  GROSS AMOUNT	(8) DEDUCTIONS						(9)  NET WAGES PAID FOR WEEK/
				MON	TUE	WED	THU	FRI	SAT	SUN				* Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions						
				7	8	9	10	11	12	13					WITH- HOLDING					
				HOURS WORKED EACH DAY										TOTAL						
(b) (6)	0	Laborer: Common/General	D	0	0	0	0	0	0	0	0.00	(b) (4)								
			O	0	0	0	0	0	0	0	0.00									
			S	8.00	8.00	8.00	8.00	8.00	0	0	40.00									
	1	Bricklayer:	D	0	0	0	0	0	0	0	0.00									
			O	0	0	0	0	0	0	0	0.00									
			S	8.00	8.00	8.00	8.00	8.00	0	0	40.00									
	1	Laborer: Common/General	D	0	0	0	0	0	0	0	0.00									
			O	0	0	0	0	0	0	0	0.00									
			S	8.00	8.00	8.00	0	8.00	0	0	32.00									
	0	Laborer: Common/General	D	0	0	0	0	0	0	0	0.00									
			O	0	0	0	0	0	0	0	0.00									
			S	0	3.00	0	0	0	0	0	3.00									

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

# PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage DC170002 (Mod. 3) Det:	ADDRESS 2320 Old Washington Road Waldorf, MD 20601	
Atlantic Refinishing & Restoration, Inc.				
PAYROLL NO. 25.0	FOR WEEK ENDING 01/13/2019	PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.		PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020

(1)  NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2)  NO. OF WITH-HOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST, OT or DT	(4) DAY AND DATE							(5)  TOTAL HOURS	(6)  RATE	(7)  GROSS AMOUNT	(8) DEDUCTIONS						(9)  NET WAGES PAID FOR WEEK/																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																				
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(b) (6)	1	Bricklayer:	D	0	0	0	0	0	0	0	0.00	(b) (4)																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																												</

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Date January 17th, 2019

I, (b) (6) (b) (6)  
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company on the  
Inc.) (Contractor or Subcontractor)

St. Elizabeths West Campus Building 54; that during the payroll period commencing on the  
(Building or Work)

7th day of January, 2019, and ending the 13th day of January, 2019

all persons employed on said project have been paid the full weekly wages earned, that no rebates  
have been or will be made either directly or indirectly to or no behalf of said

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company from the full  
Inc.) (Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly  
from the full wages earned by any person, other than permissible deductions as defined in Regulations,  
Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48  
Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

FICA, FWH, Medicare, State Tax, Other

(2) That any payrolls otherwise under this contract required to be submitted for the above period are  
correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the  
applicable wage rates contained in any wage determination incorporated into the contract; that the  
classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship  
program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and  
Training, United States Department of Labor, or if no such recognized agency exists in a State, are  
registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ - in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the  
above referenced payroll, payments of fringe benefits as listed in the contract have been  
or will be made to appropriate programs for the benefit of such employees, except as  
noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☐ - Each laborer or mechanic listed in the above referenced payroll has been paid, as  
indicated on the payroll, an amount not less than the sum of the applicable basic  
hourly wage rate plus the amount of the required fringe benefits as listed in the  
contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

REMARKS

Contract #GS-11-P-17-MK-C-0020, Wage Decision #DC170002 Mod 3 05/05/17, Payroll #25

NAME AND TITLE:

(b) (6)

SIGNATURE:

(b) (6)

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR  
SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE  
31 OF THE UNITED STATES CODE.

# PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage DC170002 (Mod. 3) Det:		ADDRESS 2320 Old Washington Road Waldorf, MD 20601	
Atlantic Refinishing & Restoration, Inc.					
PAYROLL NO. 26.0		FOR WEEK ENDING 01/20/2019		PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.	
				PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020	

(1)  NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2)  NO. OF WITH-HOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST, OT or DT	(4) DAY AND DATE							(5)  TOTAL HOURS	(6)  RATE OF PAY	(7)  GROSS AMOUNT EARNED	(8)  DEDUCTIONS						(9)  NET WAGES PAID FOR WEEK/ Check No.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																											
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While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Date January 24th, 2019

I, (b) (6) (b) (6)  
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company on the  
Inc.) (Contractor or Subcontractor)

St. Elizabeths West Campus Building 54; that during the payroll period commencing on the  
(Building or Work)

14th day of January, 2019, and ending the 20th day of January, 2019

all persons employed on said project have been paid the full weekly wages earned, that no rebates  
have been or will be made either directly or indirectly to or no behalf of said

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company from the full  
Inc.) (Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly  
from the full wages earned by any person, other than permissible deductions as defined in Regulations,  
Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48  
Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

FICA, FWH, Medicare, State Tax

(2) That any payrolls otherwise under this contract required to be submitted for the above period are  
correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the  
applicable wage rates contained in any wage determination incorporated into the contract; that the  
classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship  
program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and  
Training, United States Department of Labor, or if no such recognized agency exists in a State, are  
registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ - in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the  
above referenced payroll, payments of fringe benefits as listed in the contract have been  
or will be made to appropriate programs for the benefit of such employees, except as  
noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☐ - Each laborer or mechanic listed in the above referenced payroll has been paid, as  
indicated on the payroll, an amount not less than the sum of the applicable basic  
hourly wage rate plus the amount of the required fringe benefits as listed in the  
contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

REMARKS

Contract #GS-11-P-17-MK-C-0020, Wage Decision #DC170002 Mod 3 05/05/17, Payroll #26

NAME AND TITLE:

(b) (6)

SIGNATURE:

(b) (6)

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR  
SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE  
31 OF THE UNITED STATES CODE.

# PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage DC170002 (Mod. 3) Det:	ADDRESS 2320 Old Washington Road Waldorf, MD 20601	
Atlantic Refinishing & Restoration, Inc.				
PAYROLL NO. 27.0	FOR WEEK ENDING 01/27/2019	PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.		PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020

(1)  NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2)  NO. OF WITHHOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST. OT or DT	(4) DAY AND DATE							(5)  TOTAL HOURS	(6)  RATE	(7)  GROSS AMOUNT	(8) DEDUCTIONS  * Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions						(9)  NET WAGES PAID FOR WEEK/																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																				
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While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.



Date February 14th, 2019

I, (b) (6) (b) (6)  
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company on the  
Inc.) (Contractor or Subcontractor)

St. Elizabeths West Campus Building 54; that during the payroll period commencing on the  
(Building or Work)

21st day of January, 2019, and ending the 27th day of January, 2019

all persons employed on said project have been paid the full weekly wages earned, that no rebates  
have been or will be made either directly or indirectly to or no behalf of said

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company from the full  
Inc.) (Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly  
from the full wages earned by any person, other than permissible deductions as defined in Regulations,  
Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48  
Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

FICA, FWH, Medicare, State Tax

(2) That any payrolls otherwise under this contract required to be submitted for the above period are  
correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the  
applicable wage rates contained in any wage determination incorporated into the contract; that the  
classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship  
program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and  
Training, United States Department of Labor, or if no such recognized agency exists in a State, are  
registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ - in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the  
above referenced payroll, payments of fringe benefits as listed in the contract have been  
or will be made to appropriate programs for the benefit of such employees, except as  
noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ - Each laborer or mechanic listed in the above referenced payroll has been paid, as  
indicated on the payroll, an amount not less than the sum of the applicable basic  
hourly wage rate plus the amount of the required fringe benefits as listed in the  
contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

REMARKS

Contract #GS-11-P-17-MK-C-0020, Wage Decision #DC170002 Mod 3 05/05/17, Payroll #27

NAME AND TITLE:

(b) (6)

SIGNATURE:

(b) (6)

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR  
SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE  
31 OF THE UNITED STATES CODE.

# PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage DC170002 (Mod. 3) Det:	ADDRESS 2320 Old Washington Road Waldorf, MD 20601	
Atlantic Refinishing & Restoration, Inc.				
PAYROLL NO. 28.1	FOR WEEK ENDING 02/03/2019	PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.		PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020

(1)  NAME, ADDRESS, AND Identification Number	(2)  NO. OF WITH-HOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST, OT or DT	(4) DAY AND DATE							(5)  TOTAL HOURS	(6)  RATE	(7)  GROSS AMOUNT	(8) DEDUCTIONS						(9)  NET WAGES PAID FOR WEEK/																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																								
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(b) (6)	1	Laborer: Common/General	D	0	0	0	0	0	0	0	0.00	(b) (4)																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

# PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage DC170002 (Mod. 3) Det:		ADDRESS 2320 Old Washington Road Waldorf, MD 20601	
Atlantic Refinishing & Restoration, Inc.					
PAYROLL NO. 28.1		FOR WEEK ENDING 02/03/2019		PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.	
				PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020	

(1)  NAME, ADDRESS, AND Identification Number	(2)  O. OF WITHHOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST. OT or DT	(4) DAY AND DATE							(5)  TOTAL HOURS	(6)  RATE OF PAY	(7)  GROSS AMOUNT EARNED	(8) DEDUCTIONS  * Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions						(9)  NET WAGES PAID FOR WEEK/ Check No.
				MON	TUE	WED	THU	FRI	SAT	SUN										
				28	29	30	31	1	2	3										
				HOURS WORKED EACH DAY																
(b) (6)	0	Laborer: Common/General	D	0	0	0	0	0	0	0	0.00	(b) (4)								
			O	0	0	0	0	1.75	0	0	1.75									
			S	7.50	2.00	2.00	2.00	2.75	0	0	16.25									

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Date February 14th, 2019

I, (b) (6) (b) (6)  
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company on the  
Inc.) (Contractor or Subcontractor)

St. Elizabeths West Campus Building 54; that during the payroll period commencing on the  
(Building or Work)

28th day of January, 2019, and ending the 3rd day of February, 2019

all persons employed on said project have been paid the full weekly wages earned, that no rebates  
have been or will be made either directly or indirectly to or no behalf of said

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company from the full  
Inc.) (Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly  
from the full wages earned by any person, other than permissible deductions as defined in Regulations,  
Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48  
Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

FICA, FWH, Medicare, State Tax

(2) That any payrolls otherwise under this contract required to be submitted for the above period are  
correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the  
applicable wage rates contained in any wage determination incorporated into the contract; that the  
classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship  
program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and  
Training, United States Department of Labor, or if no such recognized agency exists in a State, are  
registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ - in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the  
above referenced payroll, payments of fringe benefits as listed in the contract have been  
or will be made to appropriate programs for the benefit of such employees, except as  
noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ - Each laborer or mechanic listed in the above referenced payroll has been paid, as  
indicated on the payroll, an amount not less than the sum of the applicable basic  
hourly wage rate plus the amount of the required fringe benefits as listed in the  
contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

REMARKS

Contract #GS-11-P-17-MK-C-0020, Wage Decision #DC170002 Mod 3 05/05/17, Revised  
Payroll #28.1-The wage scale that I was given has Tile Setter at  $27.25 + 10.68 = 37.93$ . Both  
employees were paid 37.93 per hour worked.

NAME AND TITLE:

(b) (6)

SIGNATURE:

(b) (6)

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR  
SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE  
31 OF THE UNITED STATES CODE.

# PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage DC170002 (Mod. 3) Det:		ADDRESS 2320 Old Washington Road Waldorf, MD 20601	
Atlantic Refinishing & Restoration, Inc.					
PAYROLL NO. 29.0		FOR WEEK ENDING 02/10/2019		PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.	
				PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020	

(1)  NAME, ADDRESS, AND	(2)  OF WITHHOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST, OT or DT	(4) DAY AND DATE							(5)  TOTAL HOURS	(6)  RATE	(7)  GROSS AMOUNT	(8) DEDUCTIONS					(9)  NET WAGES PAID FOR WEEK/	
				MON	TUE	WED	THU	FRI	SAT	SUN				* Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions						
				4	5	6	7	8	9	10					WITH- HOLDING					TOTAL
				HOURS WORKED EACH DAY																
(b) (6)	1	Laborer: Common/General	D	0	0	0	0	0	0	0	0.00	(b) (4)								
			O	0	0	0	0	0.25	0	0	0.25									
			S	8.00	8.00	8.25	9.00	6.75	0	0	40.00									
	1	Terrazzo Finisher	D	0	0	0	0	0	0	0	0.00									
			O	0	0	0	0	0	0	0	0.00									
			S	0	0	0	5.00	4.00	0	0	9.00									
	1	Tile Setter	D	0	0	0	0	0	0	0	0.00									
			O	0	0	0	0	0	0	0	0.00									
			S	0	0	4.00	4.00	3.00	0	0	11.00									
	1	Laborer: Common/General	D	0	0	0	0	0	0	0	0.00									
			O	0	0	0	0	0	0	0	0.00									
			S	7.75	8.00	4.25	0	0	0	0	20.00									

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

# PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage DC170002 (Mod. 3) Det:		ADDRESS 2320 Old Washington Road Waldorf, MD 20601	
Atlantic Refinishing & Restoration, Inc.					
PAYROLL NO. 29.0		FOR WEEK ENDING 02/10/2019		PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.	
				PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020	

(1)  NAME, ADDRESS, AND Identification Number	(2)  O. OF WITHHOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST, OT or DT	(4) DAY AND DATE							(5)  TOTAL HOURS	(6)  RATE	(7)  GROSS AMOUNT	(8) DEDUCTIONS						(9)  NET WAGES PAID FOR WEEK/																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																		
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While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Date February 14th, 2019

I, (b) (6) (b) (6)  
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company on the  
Inc.) (Contractor or Subcontractor)

St. Elizabeths West Campus Building 54; that during the payroll period commencing on the  
(Building or Work)

4th day of February, 2019, and ending the 10th day of February, 2019

all persons employed on said project have been paid the full weekly wages earned, that no rebates  
have been or will be made either directly or indirectly to or no behalf of said

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company from the full  
Inc.) (Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly  
from the full wages earned by any person, other than permissible deductions as defined in Regulations,  
Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48  
Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

FICA, FWH, Medicare, State Tax

(2) That any payrolls otherwise under this contract required to be submitted for the above period are  
correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the  
applicable wage rates contained in any wage determination incorporated into the contract; that the  
classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship  
program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and  
Training, United States Department of Labor, or if no such recognized agency exists in a State, are  
registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ - in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the  
above referenced payroll, payments of fringe benefits as listed in the contract have been  
or will be made to appropriate programs for the benefit of such employees, except as  
noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ - Each laborer or mechanic listed in the above referenced payroll has been paid, as  
indicated on the payroll, an amount not less than the sum of the applicable basic  
hourly wage rate plus the amount of the required fringe benefits as listed in the  
contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

REMARKS

Contract #GS-11-P-17-MK-C-0020, Wage Decision #DC170002 Mod 3 05/05/17, Payroll #29

NAME AND TITLE:

(b) (6)

SIGNATURE:

(b) (6)

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR  
SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE  
31 OF THE UNITED STATES CODE.

# PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage DC170002 (Mod. 3) Det:	ADDRESS 2320 Old Washington Road Waldorf, MD 20601	
Atlantic Refinishing & Restoration, Inc.				
PAYROLL NO. 30.0	FOR WEEK ENDING 02/17/2019	PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.		PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020

(1)  NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2)  NO. OF WITH-HOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST, OT or DT	(4) DAY AND DATE							(5)  TOTAL HOURS	(6)  RATE	(7)  GROSS AMOUNT	(8) DEDUCTIONS						(9)  NET WAGES PAID FOR WEEK/ Check No.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																	
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While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.



# PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage DC170002 (Mod. 3) Det:		ADDRESS 2320 Old Washington Road Waldorf, MD 20601	
Atlantic Refinishing & Restoration, Inc.					
PAYROLL NO. 30.0		FOR WEEK ENDING 02/17/2019		PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.	
				PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020	

(1)  NAME, ADDRESS, AND Identification Number	(2)  NO. OF WITH-HOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST, OT or DT	(4) DAY AND DATE							(5)  TOTAL HOURS	(6)  RATE	(7)  GROSS AMOUNT	(8) DEDUCTIONS					(9)  NET WAGES PAID FOR WEEK/																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																					
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While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

# PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage DC170002 (Mod. 3) Det:	ADDRESS 2320 Old Washington Road Waldorf, MD 20601
Atlantic Refinishing & Restoration, Inc.			
PAYROLL NO. 30.0	FOR WEEK ENDING 02/17/2019	PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.	PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020

(1)  NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2)  NO. OF WITHHOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST, OT or DT	(4) DAY AND DATE							(5)  TOTAL HOURS	(6)  RATE	(7)  GROSS AMOUNT	(8) DEDUCTIONS						(9)  NET WAGES PAID FOR WEEK/																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																					
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While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Date February 21st, 2019

I, (b) (6) (b) (6)  
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company on the  
Inc.) (Contractor or Subcontractor)

St. Elizabeths West Campus Building 54 ; that during the payroll period commencing on the  
(Building or Work)

11th day of February, 2019, and ending the 17th day of February, 2019

all persons employed on said project have been paid the full weekly wages earned, that no rebates  
have been or will be made either directly or indirectly to or no behalf of said

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company from the full  
Inc.) (Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly  
from the full wages earned by any person, other than permissible deductions as defined in Regulations,  
Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48  
Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

FICA, FWH, Medicare, State Tax, Other

(2) That any payrolls otherwise under this contract required to be submitted for the above period are  
correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the  
applicable wage rates contained in any wage determination incorporated into the contract; that the  
classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship  
program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and  
Training, United States Department of Labor, or if no such recognized agency exists in a State, are  
registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ - in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the  
above referenced payroll, payments of fringe benefits as listed in the contract have been  
or will be made to appropriate programs for the benefit of such employees, except as  
noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ - Each laborer or mechanic listed in the above referenced payroll has been paid, as  
indicated on the payroll, an amount not less than the sum of the applicable basic  
hourly wage rate plus the amount of the required fringe benefits as listed in the  
contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

REMARKS

Contract #GS-11-P-17-MK-C-0020, Wage Decision #DC170002 Mod 3 05/05/17, Payroll #30

NAME AND TITLE:

(b) (6)

SIGNATURE:

(b) (6)

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR  
SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE  
31 OF THE UNITED STATES CODE.

# PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage DC170002 (Mod. 3) Det:	ADDRESS 2320 Old Washington Road Waldorf, MD 20601	
Atlantic Refinishing & Restoration, Inc.				
PAYROLL NO. 31.0		FOR WEEK ENDING 02/24/2019		PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.
				PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020

(1)  NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2)  NO. OF WITH-HOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST, OT or DT	(4) DAY AND DATE							(5)  TOTAL HOURS	(6)  RATE	(7)  GROSS AMOUNT	(8) DEDUCTIONS						(9)  NET WAGES PAID FOR WEEK/
				MON	TUE	WED	THU	FRI	SAT	SUN				* Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions						
				18	19	20	21	22	23	24					WITH- HOLDING					
				HOURS WORKED EACH DAY										TOTAL						
(b) (6)	1	Laborer: Common/General	D	0	0	0	0	0	0	0	0.00	(b) (4)								
			O	0	0	0	0	0	0	0	0.00									
			S	8.00	0	0	7.25	7.50	0	0	22.75									
	1	Laborer: Common/General	D	0	0	0	0	0	0	0	0.00									
			O	0	0	0	0	0	0	0	0.00									
			S	7.00	8.00	5.50	8.50	6.75	0	0	35.75									
	1	Tile Setter	D	0	0	0	0	0	0	0	0.00									
			O	0	0	0	0	0	0	0	0.00									
			S	7.00	5.00	4.00	0	4.00	0	0	20.00									
	1	Laborer: Common/General	D	0	0	0	0	0	0	0	0.00									
			O	0	0	0	0	0	0	0	0.00									
			S	0	3.00	1.50	8.00	4.00	0	0	16.50									

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

# PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage DC170002 (Mod. 3) Det:	ADDRESS 2320 Old Washington Road Waldorf, MD 20601
Atlantic Refinishing & Restoration, Inc.			
PAYROLL NO. 31.0	FOR WEEK ENDING 02/24/2019	PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.	PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020

(1)  NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2)  NO.OF WITH-HOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST, OT or DT	(4) DAY AND DATE							(5)  TOTAL HOURS	(6)  RATE	(7)  GROSS AMOUNT	(8) DEDUCTIONS						(9)  NET WAGES PAID FOR WEEK/																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																				
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# PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage DC170002 (Mod. 3) Det:		ADDRESS 2320 Old Washington Road Waldorf, MD 20601																					
Atlantic Refinishing & Restoration, Inc.																									
PAYROLL NO. 31.0		FOR WEEK ENDING 02/24/2019		PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.																					
				PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020																					
(1)  NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2)  NO. OF WITHHOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	(4) DAY AND DATE ST, OT or DT MON TUE WED THU FRI SAT SUN 18 19 20 21 22 23 24 HOURS WORKED EACH DAY	(5)  TOTAL HOURS	(6) (b) (4)																				
(b) (6)	2	Laborer: Common/General	D	0	0	0	0	0	0	0	0.00	(b) (4)													
			O	0	0	0	0	0	0	0	0.00														
			S	0	3.00	1.50	8.00	0	0	0	12.50														
<table border="1"> <tr> <td colspan="2">(7) GROSS</td> <td colspan="2">(8) DEDUCTIONS</td> <td colspan="2">* Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions</td> <td>(9) NET WAGES PAID FOR WEEK/</td> </tr> <tr> <td></td> <td></td> <td>WITH-</td> <td></td> <td></td> <td></td> <td></td> </tr> </table>												(7) GROSS		(8) DEDUCTIONS		* Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions		(9) NET WAGES PAID FOR WEEK/			WITH-				
(7) GROSS		(8) DEDUCTIONS		* Other Deductions - 1) Local Tax 1 2) Local Tax 2 3) Other Deductions		(9) NET WAGES PAID FOR WEEK/																			
		WITH-																							

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Date February 28th, 2019

I, (b) (6) (b) (6)  
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company on the  
Inc.) (Contractor or Subcontractor)

St. Elizabeths West Campus Building 54 ; that during the payroll period commencing on the  
(Building or Work)

18th day of February, 2019, and ending the 24th day of February, 2019

all persons employed on said project have been paid the full weekly wages earned, that no rebates  
have been or will be made either directly or indirectly to or no behalf of said

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company from the full  
Inc.) (Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly  
from the full wages earned by any person, other than permissible deductions as defined in Regulations,  
Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48  
Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

FICA, FWH, Medicare, State Tax, Other

(2) That any payrolls otherwise under this contract required to be submitted for the above period are  
correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the  
applicable wage rates contained in any wage determination incorporated into the contract; that the  
classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship  
program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and  
Training, United States Department of Labor, or if no such recognized agency exists in a State, are  
registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ - in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the  
above referenced payroll, payments of fringe benefits as listed in the contract have been  
or will be made to appropriate programs for the benefit of such employees, except as  
noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ - Each laborer or mechanic listed in the above referenced payroll has been paid, as  
indicated on the payroll, an amount not less than the sum of the applicable basic  
hourly wage rate plus the amount of the required fringe benefits as listed in the  
contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

REMARKS

Contract #GS-11-P-17-MK-C-0020, Wage Decision #DC170002 Mod 3 05/05/17, Payroll #31

NAME AND TITLE:

(b) (6)

SIGNATURE:

(b) (6)

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR  
SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE  
31 OF THE UNITED STATES CODE.

# PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage DC170002 (Mod. 3) Det:	ADDRESS 2320 Old Washington Road Waldorf, MD 20601	
Atlantic Refinishing & Restoration, Inc.				
PAYROLL NO. 32.0	FOR WEEK ENDING 03/03/2019	PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.		PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020

(1)  NAME, ADDRESS, AND Identification Number	(2)  NO. OF WITHHOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST, OT or DT	(4) DAY AND DATE							(5)  TOTAL HOURS	(6)  RATE	(7)  GROSS AMOUNT	(8) DEDUCTIONS						(9)  NET WAGES PAID FOR WEEK/																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																		
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While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.



# PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage DC170002 (Mod. 3) Det:	ADDRESS 2320 Old Washington Road Waldorf, MD 20601	
Atlantic Refinishing & Restoration, Inc.				
PAYROLL NO. 32.0	FOR WEEK ENDING 03/03/2019	PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.		PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020

(1)  NAME, ADDRESS, AND Identification Number OF EMPLOYEE	(2)  NO. OF WITH-HOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST, OT or DT	(4) DAY AND DATE							(5)  TOTAL HOURS	(6)  RATE OF PAY	(7)  GROSS AMOUNT	(8) DEDUCTIONS						(9)  NET WAGES PAID FOR WEEK/ Check No.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																											
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While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Date March 7th, 2019

I, (b) (6) (b) (6)  
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company on the  
Inc.) (Contractor or Subcontractor)

St. Elizabeths West Campus Building 54; that during the payroll period commencing on the  
(Building or Work)

25th day of February, 2019, and ending the 3rd day of March, 2019

all persons employed on said project have been paid the full weekly wages earned, that no rebates  
have been or will be made either directly or indirectly to or no behalf of said

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company from the full  
Inc.) (Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly  
from the full wages earned by any person, other than permissible deductions as defined in Regulations,  
Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48  
Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

FICA, FWH, Medicare, State Tax

(2) That any payrolls otherwise under this contract required to be submitted for the above period are  
correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the  
applicable wage rates contained in any wage determination incorporated into the contract; that the  
classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship  
program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and  
Training, United States Department of Labor, or if no such recognized agency exists in a State, are  
registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ - in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the  
above referenced payroll, payments of fringe benefits as listed in the contract have been  
or will be made to appropriate programs for the benefit of such employees, except as  
noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☐ - Each laborer or mechanic listed in the above referenced payroll has been paid, as  
indicated on the payroll, an amount not less than the sum of the applicable basic  
hourly wage rate plus the amount of the required fringe benefits as listed in the  
contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

REMARKS

Contract #GS-11-P-17-MK-C-0020, Wage Decision #DC170002 Mod 3 05/05/17, Payroll #32

NAME AND TITLE:

(b) (6)

SIGNATURE:

(b) (6)

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR  
SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE  
31 OF THE UNITED STATES CODE.

# PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/> Wage DC170002 (Mod. 3) Atlantic Refinishing & Restoration, Inc. Det:		ADDRESS 2320 Old Washington Road Waldorf, MD 20601	
PAYROLL NO. 33.0		FOR WEEK ENDING 03/10/2019	PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.
		PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020	

(1)  NAME, ADDRESS, AND Identification Number	(2)  O.O.F WITH-HOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST. OT or DT	(4) DAY AND DATE							(5)  TOTAL HOURS	(6)  RATE	(7)  GROSS AMOUNT	(8) DEDUCTIONS						(9)  NET WAGES PAID FOR WEEK/ Check No.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																			
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While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

# PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		Wage DC170002 (Mod. 3) Det:		ADDRESS 2320 Old Washington Road Waldorf, MD 20601	
Atlantic Refinishing & Restoration, Inc.					
PAYROLL NO. 33.0		FOR WEEK ENDING 03/10/2019		PROJECT AND LOCATION St. Elizabeths West Campus Building 54 Washington, D.C.	
				PROJECT OR CONTRACT NO. G17.0357.1700/GS-11-P-17-MK-C-0020	

(1)  NAME, ADDRESS, AND Identification Number	(2)  NO. OF WITH-HOLDING EXEMPTIONS	(3)  WORK CLASSIFICATION	ST, OT or DT	(4) DAY AND DATE							(5)  TOTAL HOURS	(6)  RATE	(7)  GROSS AMOUNT	(8) DEDUCTIONS						(9)  NET WAGES PAID FOR WEEK/																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																			
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While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Date March 14th, 2019

I, (b) (6) (b) (6)  
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company on the  
Inc.) (Contractor or Subcontractor)

St. Elizabeths West Campus Building 54; that during the payroll period commencing on the  
(Building or Work)

4th day of March, 2019, and ending the 10th day of March, 2019

all persons employed on said project have been paid the full weekly wages earned, that no rebates  
have been or will be made either directly or indirectly to or no behalf of said

Atlantic Refinishing & Restoration, Inc. (a sub of Grunley Construction Company from the full  
Inc.) (Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly  
from the full wages earned by any person, other than permissible deductions as defined in Regulations,  
Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48  
Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

FICA, FWH, Medicare, State Tax

(2) That any payrolls otherwise under this contract required to be submitted for the above period are  
correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the  
applicable wage rates contained in any wage determination incorporated into the contract; that the  
classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship  
program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and  
Training, United States Department of Labor, or if no such recognized agency exists in a State, are  
registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ - in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the  
above referenced payroll, payments of fringe benefits as listed in the contract have been  
or will be made to appropriate programs for the benefit of such employees, except as  
noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☐ - Each laborer or mechanic listed in the above referenced payroll has been paid, as  
indicated on the payroll, an amount not less than the sum of the applicable basic  
hourly wage rate plus the amount of the required fringe benefits as listed in the  
contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

REMARKS

Contract #GS-11-P-17-MK-C-0020, Wage Decision #DC170002 Mod 3 05/05/17, Payroll #33

NAME AND TITLE:

(b) (6)

SIGNATURE:

(b) (6)

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR  
SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE  
31 OF THE UNITED STATES CODE.